

KENTUCKY WIC APPROVED ITEMS PRICE LIST

APPLYING VENDORS, SEE INSTRUCTIONS ON BACK

WIC – 24
Rev. 8/16

Date: _____

Vendor Name: _____

Vendor #: _____
(if applicable)

Milk	Quart	Half Gallon	Gallon
Whole			
Lowfat/Skim			
Soy			
Lactose Free			

Cheese	8 oz.	16 oz.
Block		
Crumbled		
Cubed		
Sliced		
Shredded		
String		

Dozen Grade “A” Eggs	
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Juice	12 oz.	48 oz.	64 oz.

Beans & Peas	16 oz. Bag Dry Beans/Peas	
	15 to 16 oz. Can	

Whole Grains	14 oz.	16 oz.
Bread		
Brown Rice		
Tortillas		

Fish	3.75 oz.	5 oz.	6 oz.	7.5 oz.	15 oz.
Pink Salmon					
Sardines					
Tuna					

Miscellaneous	8 oz.	14 – 16 oz.	16 – 18 oz.
Peanut Butter			
Tofu			

Cereal	Sizes in Ounces	Price
B&G Foods Cream of Wheat 2 ½ Minute	12	
	28	
B&G Foods Cream of Wheat Instant	12	
	28	
B&G Foods Cream of Wheat Whole Grain	18	
General Mills Multi-Grain Cheerios	12	
	18	
General Mills Cheerios	12	
	18	
	21	
General Mills Cheerios Ancient Grains	11.6	
General Mills Corn Chex	12	
	18	
General Mills Rice Chex	12	
	18	
General Mills Wheat Chex	14	
General Mills Dora the Explorer	18	
General Mills Fiber One Honey Clusters	14.25	
General Mills Kix	12	
	18	
General Mills Berry Berry Kix	12	
General Mills Honey Kix	12	
General Mills Total	10.6	
	16	
General Mills Wheaties	10.9	
	15.6	
Kellogg’s All Bran Complete Wheat Flakes	18	
Kellogg’s Corn Flakes	12	
	18	
	24	
	36	

Cereal (continued...)	Size in ounces	Price
Kellogg’s Frosted Bite Size Mini Wheats	18	
	24	
	36	
Kellogg’s Frosted Little Bites Size Mini Wheats	15.2	
Post Alpha-Bits	12	
Post Bran Flakes	16	
Post Grape Nuts	20.5	
	29	
Post Grape Nut Flakes	18	
Post Honey Roasted Honey Bunches of Oats	14.5	
	18	
	27	
Post Honey Bunches of Oats with Vanilla Bunches	18	
Post Honey Bunches of Oats Whole Grain Honey Crunch	18	
Quaker Original Instant Oatmeal	11.8	
Quaker King Vitaman	10	
Quaker Life	13	
	18	
Quaker Oatmeal Squares Golden Maple	14.5	
Quaker Oatmeal Squares Brown Sugar	14.5	
	21	
Malt O Meal Crispy Rice	18	
	36	
Malt O Meal Frosted Mini Spooners	15	
	18	
	36	
Malt O Meal Original Hot Wheat Cereal	18	
	28	
	36	
Sunbelt Bakery Simple Granola	16	

Infant (Miscellaneous)

Dry Infant Cereal	8 oz.	
Infant Fruits and Vegetables	4 oz.	
	8 oz. (2-packs)	

Infant Formula

Type	Concentrate 12.1 oz.	4-pack 33.8 oz. Ready To Feed	12.4 oz. Powder	12.7 oz. Powder	12.9 oz. Powder
Good Start Gentle					
Good Start Soothe					
Good Start Soy					

I, _____,
(PLEASE PRINT LEGIBLY THE NAME OF STORE REPRESENTATIVE)

do hereby agree that the items listed in this form were available at the store indicated and the prices entered were the actual shelf prices. I understand this information is to be used to evaluate my inventory as set forth in the WIC Program Vendor Agreement item 1(c), is used in the comparison of prices actually charged for WIC food instruments, and is used to evaluate prices for application. I understand that if my contract is terminated, disqualified, or not renewed for failure to meet inventory or failure to properly mark the prices of WIC food items, I cannot reapply for sixty (60) days from the day that I return my stamp or my application is denied for the first occurrence. A second occurrence will result in a 120 day disqualification and a third occurrence will result in a one (1) year disqualification. (902 KAR 18:061) Applying vendors see back.

I further understand that I am to report to the State WIC Agency, within the next 14 days, any price increases. Failure to do so could result in overcharges. I have reviewed this approved items price list and received a copy of this form.

(SIGNATURE OF STORE REPRESENTATIVE) (DATE)

(MONITOR SIGNATURE)

OFFICE USE ONLY
Date Post Review Completed _
Overcharge(s) <input type="checkbox"/> YES <input type="checkbox"/> NO
Dates of transactions reviewed _

INSTRUCTIONS

- 1. **Date Completed** – Enter the numerical month, day and year on which you are completing the Price List. For example, May 1, 2016, would be written as 05/01/2016.
- 2. **Vendor Number** – An applying store will leave the area blank.
- 3. **Name of Store** – Print the name of the store.
- 4. **Name of Representative** – Print the name of the store’s representative.
- 5. **Signature of Representative** - Enter the signature of the store’s representative.
- 6. **Date of Signature** – Enter the date signed by the store’s representative.
- 7. **Monitor’s Signature** – State Agency Use Only.
- 8. **Prices** – Complete prices for the WIC approved foods as outlined below.

THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER.

PRICES ARE TO BE THE SHELF PRICES OF WIC APPROVED FOODS IN STOCK

- Milk** - Enter the lowest price brand in stock by size.
- Cheese** - Enter the lowest price brand in stock by size.
- Eggs** - Enter the highest price charged for eggs.
- Juice** - Enter the highest price for each type, brand, and size of juice in stock.
- Dry Beans or Peas** - Enter the highest price charged for sizes specified.
- Canned Beans** - Enter the highest price charged for sizes specified.
- Whole Grain Products** - Enter the highest price charged for each type and size in stock.
- Whole Grain Bread** - Enter the highest price charged for each type and size in stock.
- Tuna/Salmon/Sardines** - Enter the highest price charged for each type and size in stock.
- Peanut Butter** - Enter the highest price charged for sizes specified.
- Tofu** – Enter the highest price charged for brand and sizes specified.
- Cereal** - Enter the highest price for each type and size in stock.
- Infant Cereal** - Enter the highest price charged for size specified.
- Infant Fruits and Vegetables** - Enter the highest price charged size specified.
- Infant Formula** - Enter the highest price for each type and size in stock.

- 9. I do hereby agree that the items listed in this form were available at the store indicated and the prices entered were the actual shelf price. I understand this information is to be used to evaluate my inventory as set forth in the WIC Program Vendor Agreement item 1(c), is used in the comparison of prices charged for WIC food instruments, and is used to evaluate prices for application. For a retailer who is applying for the first time (and has not been terminated or not renewed) and is denied, then the retailer may reapply without a waiting period. If my application is denied again, I cannot reapply for sixty (60) days from the denial. A second occurrence will result in a 90 day disqualification and a third occurrence will result in a 120 day disqualification. (902 KAR 18:050)
- 10. If an applying store, return this form with the properly completed Application to the appropriate Local Agency. If an authorized WIC vendor, return this form as directed.